

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Examiner : Deepak R. Rao  
Group Art Unit : 1624  
Applicants : Francesco Salituro et al.  
Application No. : 10/658,111 Confirmation No. : 9944  
Filed : September 8, 2003  
For : INHIBITORS OF p38

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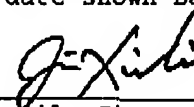
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## Enclosures:

1. Transmittal Form (1 page)
2. Fee Transmittal (1 page) in Duplicate
3. Petition for Extension of Time (1 page) in Duplicate
4. Amendment and Reply (15 pages)

TOTAL NUMBER OF PAGES, INCLUDING COVER LETTER 21

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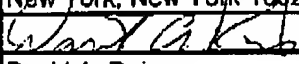
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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10/658,111	
	Filing Date	September 8, 2003	
	First Named Inventor	Francesco Salituro et al.	
	Art Unit	1624	
	Examiner Name	Deepak R. Rao	
Total Number of Pages in This Submission	18	Attorney Docket Number	VPI/98-11 DIV

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	Fish & Neave IP Group Ropes & Gray LLP Customer No. 1473 1251 Avenue of the Americas New York, New York 10020-1104	
Signature		
Printed name	David A. Roise	
Date	June 30, 2006	Reg. No. 47,904

CERTIFICATE OF TRANSMISSION/MAILING		
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Typed or printed name	Lily Jiang	Date June 30, 2006

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Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

# FEE TRANSMITTAL

## for FY 2006

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$610.00

### Complete if Known

Application Number 10/658,111  
Filing Date September 8, 2003  
First Named Inventor Francesco Salituro et al.  
Examiner Name Deepak R. Rao  
Art Unit 1624  
Attorney Docket No. VPI/98-11 DIV

### METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify):

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### FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)

#### 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

#### 2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180
Total Claims	Extra Claims	Fee (\$)
28	- 20 or HP = 5	x 50 = 250.00
HP = highest number of total claims paid for, if greater than 20		
Indep. Claims	Extra Claims	Fee (\$)
1	- 3 or HP = 0	x 0 = 0
HP = highest number of independent claims paid for, if greater than 3		
Multiple Dependent Claims		
Fee (\$)	Fee Paid (\$)	
360.00	360.00	

#### 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).


Total Sheets - 100 = Extra Sheets /50= Number of each additional 50 or fraction thereof x Fee (\$)

#### 4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge):

#### SUBMITTED BY

Signature  Registration No. 47,904 Telephone 650-617-4000  
(Attorney/Agent)  
Name (Print/Type) David A. Roise Date June 30, 2006

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